RECEIVED
2012 AUG 13 AM 11: 56
06 August 2012
FEC MAIL CENTER

Liberty or Death PAC

VIA USPS FIRST CLASS MAIL

Federal Election Commission 999 E Street, NW Washington, DC 20463

Re: Form 3X - Quarterly Report of Receipts and Disbursements

To Whom It May Concern:

Enclosed are the quarterly report or receipts and disbursements for the period from 04/12/2012 to 06/30/2012. Please accept my sincere apologies for the late submission of these documents. There was a misunderstanding on my part, and I resolve to not let it happen again. If you could indicate the receipt of these documents by emailing me at <u>LibertyOrDeathPAC@gmail.com</u>, it would be most appreciated.

Cordially,

Daniel Peters

President and Treasurer

Doniel Petron

12030873489

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

2017	ALIC	13	AM II:	56
LUIL	,,,,	Office	Use Only.	~ D

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.		ŽPE4M5	
ADDRESS (number and street) Check if different than previously reported. (ACC) 2. FEC IDENTIFICATION NUCLEUR (ACC)	LOABZ Ne	CITY A	<u> </u>	AMENDED (A)	ZIP CODE ▲
4. TYPE OF REPORT (Choose One) (a) Quarterly Reparts: April 15 Quarterly Report (Classical Contents) April 15 Quarterly Report (Classical Contents) October 15 Quarterly Report (Classical Contents) January 31 Year-End Report (Year Only) (MY) Termination Report (TER)	Report Due On: (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election Report for the:	pr 20 (M4) Primary (12P Convention (12C) / Y	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S) Runoff (30R)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period I certify that I have examined the Type or Print Name of Treasure Signature of Treasurer NOTE: Submission of false, errong	Daniel Daniel Pet	Refers	Date	• ÖB ′ &	ĊĠŢŹĠŢŹ
Office Use Only					C FORM 3X Rev. 12/2004

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name 06 30 2017 To: Report Covering the Period: From: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand January 1, (b) Cash on Hand at Beginning of Reporting Period..... Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... 7. Total Disbursements (from Line 31).......... Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)

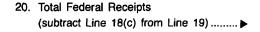
For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name 201 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)..... (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds at Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).......▶







DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

		II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.		erating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4)	Semandiamen Sen and service subservices and search in many to one operated remode services and services are services are services are services are services and services are s	general general control of the contr
		(i) Federal Share	and the second s	Mark Commence and the colored
		(ii) Non-Federal Share		0
	(b)	Other Federal Operating	procession and market the control of the collection of the collect	Encoded Artes Based Condensed Section Based Section Comments of the Comments o
		Expenditures		
	(c)	Total Operating Expenditures	รายการที่รับเทราะที่ รับการที่ เพราะที่สามารถที่ เพราะที่ ที่การเหมือนเกราะที่ เกราะที่ ที่ได้และเพลิกและที่ สามารถที่สุดสามารถ (การเกราะที่ เหมือนการกรุงและการถูกสามารถการสามารถการถูกสามารถการกระที่	
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22.		asfers to Affiliated/Other Party		Suppose State and American American State and
23.		nmitteestributions to	En de la comita de la lacación de la comita del comita de la comita del comita de la comita del comita della comita de la comita de la comita de la comita della	
	Fed	eral Candidates/Committees Other Political Committees	6	
24.		ependent Expenditures	Superconference States and Cales and States	
	(use	Schedule E)	4	6
25.	Coo	ordinated Party Expenditures J.S.C. §441a(d))		
	(use	Schedule F)		
			ACCOUNTS OF THE COMMON CONTROL OF THE CONTROL OF TH	Rene nikati, nikakazanin 1 makan makan makan mengengan nagan pengenanan menjen
26.	Loa	n Repayments Made		
~~		Mada		
27. 28.	Ref	ns Madeunds of Contributions To:	general process and the second	Encodicion administrativo de la constitución de la
	(a)	Individuals/Persons Other Than Political Committees	Δ	ß
	(b)	Political Party Committees		δ
	(c)	Other Political Committees		Energiae algentification of manifestation of manifestation of the second
		(such as PACs)		
	(al)	Total Contribution Betunds		
	(d)	Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	seemakkeen often self-errorden erden self-errorden erreter erstement	. 6
		(and Lines 20(a), (b), and (c),	Because of the confidence of t	A construction of the cons
29.	Oth	er Disbursements		\bigcirc
	•		ters and the control of the control	Townstan of Committee of Committee and Committee of Committee of Committee and Committee of Comm
30.		Ieral Election Activity (2 U.S.C. §431(20)) Allocated Federal Election Activity		
	(a)	(from Schedule H6)		Manya Contact the measurement of the many sections and the many contact of the first of the many sections and the many sections are many sections and the many sections and the many sections are many sections are many sections and the many sections are many sections and the many sections are many secti
		(i) Federal Share	O	
		,	ราชาชาติเทคา ซี. การ์ได้การกรีการการ์พระสรีโดยครั้งเกตาก็เกตเลือดเหลือเกตเลือดเลือดเลือดเลือดเลือดเลือดเลือดเล ผู้และเหตุของ แ. ก. การ์การการ์พระการ์พระสมบัติเทคา (เกตาก็เกตเลือดเลือดเลือดเลือดเลือดเลือดเลือดเลือด	
		(ii) "Levin" Share	karati and the same the same that the same t	Commence of the continue of th
	(b)	Federal Election Activity Paid Entirely	Fig. 1. C. S. in Change above sells in table studies and listen of channing standies and	Beautificant interest and state in the set in the set of the set o
		With Federal Funds	to a Commission di Samuel Commission de la Commission de	Of the state of th
	(c)	Total Federal Election Activity (add	Erradio configurationalistation erradio and analysis of the section of the sectio	
		Lines 30(a)(i), 30(a)(ii) and 30(b))▶	kararitannikresi Vannikrensikrasikrasikrasikan ilmakan kanalinasikan di	
31.	Tota	al Disbursements (add Lines 21(c), 22,	* ************************************	NWW/600000000000000000000000000000000000
		24, 25, 26, 27, 28(d), 29 and 30(c))		Annual configuration of mail and configuration of the configuration of t
	·	•	Uner adhament to en il terms of anno il to or Alice o altre contrata di tre o il Ali	Survey Commission of Terrandomer Allianna known Samuer Scown Conservation of Contract Survey
32.		al Federal Disbursements		
		btract Line 21(a)(ii) and Line 30(a)(ii)	Server de server	Secretary superior su
	fron	n Line 31)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans)	Transferranting and transf	honder directive honders handen franctive for
(from Line 11(d), page 3)		- $ -$
34. Total Contribution Refunds	Annual of the Contraction of the	Paradagara Saradara Saradara Sarada Sara
(from Line 28(d))	Committee of the contract to t	
35. Net Contributions (other than loans)	16 Transference are service to transfer programme and the service of the service	A SOLUTION DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DE LA CONTRACTION DEL CONTRACTION DE LA
(subtract Line 34 from Line 33)	Anna Come A Donne A Do	
36. Total Federal Operating Expenditures	Exerce 13 Services of Contract Contract Services of the servic	
(add Line 21(a)(i) and Line 21(b))▶	O O	
37. Offsets to Operating Expenditures	in considerant de considerant de la co Considerant de la considerant del considerant de la considerant	i da salam da a
(from Line 15, page 3)	(2)	Ø
38. Nat Operating Expenditures		
(subtract Line 37 from Line 36)		

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	3	

SCHEDULE A (FEC Form 3X)	Lies constate schedule(s)	FOR LINE NUMBER: PAGE OF
TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	, position committee	
Liberty or Rea	th PAC	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Date of Receipt
City State	Zip Code	
		Amount of Each Receipt this Period
federal political committee	egene egeneseg, mangan nen en e	
Name of Employer Occupa	tion	1
	ate Year-te-Date ▼	1
Primary General Other (specify) ▼	nde aan Mana maanahaan Doorakaan daan "	
Full Name (Last. First, Middle Initial) 3.		Date of Receipt
Mailing Address		McM2 / Poxol / Transfer
City State	Zip Code	Amount of Each Receipt this Period
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Name of Employer Occupa	ition .	
Primary General State of the Control	ate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		Date of Receipt
City State	Zip Code	Amount of Each Receipt this Period
federal political committee	on was promo posses para para para para para para para par	Amount of Each Receipt this Period
Name of Employer Occupa	ntion	
Primary General General Other (specify) ▼	ate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		The contract of the contract o
TOTAL This Period (last page this lime number only)		

SCHEDOLL B (LECTOHII 3X)	Lice congrete cohodulo(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Statem	nents may not be sold or used		
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
/ // // // // // // // // // // // // /	Death PAC		
	Raffi PAC	,	
Full Name (Last, First, Middle Initial) A.			Date of Disbursement
· - ·			**************************************
Mailing Address			
Ct.	W-1- 7 7		Basica & Estate Control Propert Control Cont
City	State Zip Code		
Purpose of Disbursement	3,0000	emtanistie eni	
	8		Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disbursen	nent For:	Туре	Consideration of the Manufacture Description of the Consideration of the
Office Sought: House Disbursen	nent For: Primary General		
	Other (specify) ▼		
State: District:	·		
Full Name (Last, First, Middle Initial)			
в.		}	Date of Disbursement
Mailing Address			M M , D D , Y Y Y Y Y Y
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City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	Surgetime elitropistic custing and assettimes Security and Terrorial
<u></u>		Type	tions of manufactured through our Price of Course National Secretary (Course Institute
Office Sought: House Disburser			
Senate	Primary General		
President State: District:	Other (specify) ▼	ĺ	
Full Name (Last, First, Middle Initial)			
C.		ļ	Date of Disbursement
			<u> </u>
Mailing Address]	to a series and the series and the series are the series and the series are the s
City	State Zip Code		
·			
Purpose of Disbursement	a control of the cont		America of Pool City
Candidate Name		Cotogony	Amount of Each Disbursement this Period
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Office Sought: House Disburser	nent For:		The self-send and the self-send possession of the self-send send self-send s
Senate	Primary General		
President District	Other (specify) ▼		
State: District:			Secretarity or the Department Secretarity of the property of t
SUBTOTAL of Dichursements This Page (antional)			
Cophonal)			demonstrates in the second
TOTAL This Period (last page this line number only)	······	······	

SCHEDULE C (FEC Form 3X) LOANS

DANS	Use separate schedule(s) PAGE OF		
	for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X		
AME OF COMMITTEE (In Full)			
Liberty or Death	PAC		
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:		
	Primary General		
Mailing Address	Other (specify) ▼		
City State ZIP Cod	de		
Original Amount of Loan Cumulative Payment To	_		
P. A. Stores Constitution in the Constitution of the Constitution			
TERMS Date Incurred Date Due	Interest Rate Secured:		
M M / D D / V V V V V V V V V V V V V V V V			
List All Endorsers or Guarantors (if any) to Loan Source	·		
1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount george organization george organization groups and george organization george organization groups and groups and george organization groups and groups and george organization grou		
	Outstanding:		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed		
	Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount reserve recycles representations and reserve speaker reserves		
City State ZIP Code	Guaranteed Outstanding:		
	homoritis maakken selit maa akkaren kina entilaasa akennonken entilan esti sa		
SUBTOTALS This Period This Page (optional)			
FOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463	<u></u>	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Liberty on Death	PAC	000518761
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name	Tremperation and the second transfer and	, , ,
	Freedom State North Commission State	militaria de la composição de la composi
Mailing Address		MAM / DESC. / TALALA
	Date Incurred or Established	
		WYM / DUD / YYYYYY
City State Zip Code	Date Due	many comment among the year of the property of
A. Has loan been restructured? No Yes	If yes, date originally incurred	W
B. If line of credit,	Total	Parts of Beneauthouse allowers allowers in the post of the second to the
Amount of this Draw:	Outstanding Balance:	A STATE OF THE STA
Amount of this Draw.	Trafficulties	Essendi o do de la completa de la c
C. Are other parties secondarily liable for the debt incurre	ed?	
AMERICAN AMERICAN	ust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the I	loan: real estate, personal	What is the value of this collateral?
property, goods, negotiable instruments, certificates of	deposit, chattel papers,	homely with a market and the substantial of the substantial control of the
stocks, accounts receivable, cash on deposit, or other	similar traditional collateral?	Secretaria de la Constitución de la Constitución de Constituci
No Yes If yes, specify:		
		Does the lender have a perfected security
	(,	interest in it? No Yes
E. Are any future contributions or future receipts of intere		What is the estimated value?
collateral for the loan? No Yes If yes, specify:		Secretary of the second secretary and the second se
		In reduced to a base its act to a draw do so teachers.
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
M M / D D / Y Y Y		
Committee of Change in the Cha	City, State, Zip:	
F. If neither of the types of collateral described above wa	as pledged for this loan, or if the	amount pledged does not equal or exceed
the loan amount, state the basis upon which this loan		
G. COMMITTEE TREASURER		DATE
Typed Name		MONG / FORD / FORVOY
Signature		San Swin Stranger
H. Attach a signed copy of the loan agreement.		
I. TO BE SIGNED BY THE LENDING INSTITUTION:		
 To the best of this institution's knowledge, the te are accurate as stated above. 	erms of the loan and other inforn	nation regarding the extension of the loan
II. The loan was made on terms and conditions (in	cluding interest rate) no more fa	vorable at the time than those imposed for
similar extensions of credit to other borrowers of comparable credit worthiness.		
III. This institution is aware of the requirement that complied with the requirements set forth at 11 C	a loan must be made on a basis	s which assures repayment, and has
AUTHORIZED REPRESENTATIVE	71 1 100.02 and 100.142 in Illan	DATE
Typed Name		
	tle	- M M / D D / V Y Y
		Commission Constitution Constit

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER:
(check only one) 9

NAME OF COMMITTEE (In Full)		
Liberty	r Death PAC	
A. Full Name (Last, First, Middle Initial) of Deb	· · · · · · · · · · · · · · · · · ·	Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	
Outstanding Balance Beginning This Period		·
terminal linearies (terminal Linearies Sciences Sciences II) linearies (terminal Sciences Sciences II)		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
and the second s	reconstitute to the linear state in the configuration of the configurati	
B. Full Name (Last, First, Middle Initial) of Debt	or or Creditor	Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	
	p	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	Secret Transferred to the secret transferred to the secret transferred to the second transferred to the second	
C. Full Name (Last, First, Middle Initial) of Deb		Nature of Debt (Purpose):
(Transition of Dest (Calipode)
Mailing Address	<u> </u>	
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
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Unantitation (Land December all contributions in the contribution of the contribution	Secret Samon Samon Street Sec. and Secret Samon Samon Street Secret Secret	
1) SUBTOTALS This Period This Page (optional).	.	
·		
2) TOTALS This Period (last page this line numb	er only)	
3) TOTAL OUTSTANDING LOANS from Schedule	e C (last page only)	and the state of t
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page only) ▶	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3X
Liberty or Death PAC	FEC IDENTIFICATION NUMBER V
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name (Last, First, Middle Initial) of Payee Date	M M / O F O / V V V V V V
Mailing Address Amo	യാൻയൻ അത്താൻ ചെയ്യാൻ വർഗാർയാൾ . unt
City State Zip Code	
Purpose of Expenditure Category/ Type Office South	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Check One	President ————————————————————————————————————
Calendar Year-To-Date Per Election for Office Sought	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Date	M = M / D = D / T = T = T
Mailing Address Amo	ount
City State Zip Code	A 223
Purpose of Expenditure Category/ Type Office Sou	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Check One	e: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (i party committee) any political party committee or its agent.	
Devid Petro Date 0.8	66 2012

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

ON BEHALF OF CANDIDATES FOR FED	PAGE OF	
2 U.S.C. §441a(d))		
(To be used only	ral Election) FOR LINE 25 OF FORM 3X	
NAME OF COMMITTEE (In Full) Liberty or Dea Ha PAC		
Has your committee been designated to make	Full Name of Subordinate Committee	
coordinated expenditures by a political party committee?		
YES NO	Ma library Addisort	
If YES, name the designating committee:	Mailing Address	
	City	State ZIP Code
	,	
Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure Category/
Mailing Address		Type Date
City State	Zip Code	M M / D D / Y Y Y Y Y
Name of Federal Candidate Supported Office Soug	<u> </u>	Amount
	Senate District:	Second Supplier of
Aggregate General Election	princip in program per yearing	To market with the second discount the second discount of the second
Full Name (Last, First, Middle Initial) of Each Payee Mailing Address		Purpose of Expenditure Category/ Type
		Date
City State	·	M M M / D TO / / WAR A CONTROL OF THE CONTROL OF TH
Name of Federal Candidate Supported Office Soug		Amount
	Senate District:	term and the second
Aggregate General Election Expenditure for this Candidate		Freezenskom nelste ver i 2 live milit memolika och 2 demoklimens Sommet Live in lannn d
Full Name (Last, First, Middle Initial) of Each Payee	330	Purpose of Expenditure Category/
Mailing Address		Type Date
City State		Waw / Long / Landson
Name of Federal Candidate Supported Office Soug	ht: House State: Senate District: Presidential	Amount Proposition Propos
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TOTAL This Period (last page this line number only)		Ò

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check V or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal%
Nonfederal
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X)		PAGE OF		
ALLOCATION RATIOS		I AGE OI		
NAME OF COMMITTEE (In Full)				
Liberty or Death PAC				
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATACTIVITIES APPEARING ON THIS REPORT.	TE SUPPORT			
Methods of allocation:				
 FUNDRAISING activities are allocated using the "funds received mether expenses must equal the federal proportion of monies raised. 	nod" where the federal pro	oportion of		
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated acco where the federal proportion of disbursements is based on the benefi tivity. For PACs Only: Direct candidate support includes public comm federal and nonfederal candidates, regardless of whether there is a re are allocated using a time/space method.	t derived by federal cand junications or voter drives	idates from the ac- s that refer to both		
ACTIVITY OR EVENT IDENTIFIER				
ACTIVITY IS:	FEDERAL %	NONFEDERAL %		
Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	%	%		
ACTIVITY OF EVENT IDENTIFIED				
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SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

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ii) Generic Voter Drive		
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iii) Exempt Activities		
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iv) Direct Fundraising (List Activity or Event Id	entifier)	
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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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A. F	Liberty or Death t			
	ull Name (Last, First, Middle Initial)	AC_		Allocated Activity or Event:
	failing Address			Administrative Fundraising Exempt Voter Drive Direct Candidate Support
_	ity · State 2	Zip Code		
C	nty . State 2	zip Code		Public Comm (ref to party only) by PAC
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	ull Name (Last, First, Middle Initial)	A. (1988))	Allocated Activity or Event:
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C	City State Z	Zip Code		Public Comm (ref to party only) by PAC
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A	ctivity or Event Identifier:		Person September 1	Control of the Control of Control
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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

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ii)	Voter ID			A COLOR DE LA COLO
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(1)	GOTV		LEBERSHOPT ALLANDANA	GOTV
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	Total Amount Transferred for Gene	ric Campaign Activity		I marker to the continued the
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TOTA	L This Period (GOTV)		gye stoogenaangen S	
· TOTA	L This Period (Generic Campaign A	ctivity)	Š.	rational terrol
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SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE		OF		
FOR LINE	30a	OF	FORM	ЗХ

NAME OF COMMITTEE (In Full)	<u>.</u>
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SECRET OF HEARY INC	Type of Allegated Activity or Cyanty
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV Voter ID Generic Campaign
	Voter ID Generic Campaign
	Allocated Activity or Event Year To Date
Mailing Address	Allocated Activity or Event Year-To-Date
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Purpose of Disbursement	Category
	Type Date
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B. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
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•	Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
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Purpose of Disbursement	Category/ Date
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C. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV
	Voter ID Generic Campaign
Mailing Address	Allocated Activity or Event Year-To-Date
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SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

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NAME OF ACCOUNT					
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	(b) Unitemized	Strates from the discount of the strategies of t	Consellence de mandre de la consellence de mandre de man		
_	(c) Total	· de la			
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5.	(e) Total OTHER DISBURSEMENTS				
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7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)		Emakanatiwa: Paulian lian isan isan isan isan isan isan isan i		
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9.	SUBTOTAL(Add Lines 7 and 8)		0		
10.	DISBURSEMENTS(From Line 6)				
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)				

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: (check only one)

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OF

PAGE

	be sold or used by any person for the purpose of soliciting contribution of any political committee to solicit contributions from such committee	
NAME OF COMMITTEE (In Full) Liberty or Death PA	C	

\rangle	NAME OF COMMITTEE (In Full) Liberty or Death PAC		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
	Mailing Address		Second Instancia abcomolinamia Terrana Second Instancia contail
	City State	Zip Code	Amount of Each Receipt this Period
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	•		Amount of Each Receipt this Period
	City State	Zip Code	
	Name of Employer or Principal Place of Business		Aggregate Year-to-Date
	Occupation		
_	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt
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	Mailing Address		
	City State	Zip Code	Amount of Each Receipt this Period
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SCHEDULE L-B (FEC Form 3X)

Use separate schedule(s)

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OF LEVIN FUNDS	for each category of the Aggregation Page	(check only one) 4a 4c 5	
Any information copied from such Reports and Statements may nor for commercial purposes, other than using the name and address.			
NAME OF COMMITTEE (In Full) Liberty or Death	PAC		
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SUBTOTAL of Disbursements This Page (optional)	>		

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): ω^{5} **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED

(3/2005)